

# Automated Debit Service Enrollment Form

## Instructions

- Complete the form below.
- Attach to the form a voided check or a bank letter stating your bank account and routing numbers. Information will be kept confidential. Voided checking deposit tickets are not an acceptable alternative.
- Return completed form and voided check or bank letter to the Town of Hillsborough:
  - By mail to Town of Hillsborough, PO Box 429, Hillsborough, NC 27278
  - In person to Hillsborough Town Hall Annex, 105 E. Corbin St., Hillsborough, North Carolina

*Enrollment takes at least one billing cycle. Pay by other methods until your monthly bill states it is paid by draft.*

## Automated Debit Service Enrollment Form

I (we) hereby authorize the Town of Hillsborough to initiate debit entries to my (our) checking account indicated below at the depository institution named below. This authorization is to remain in full force and effect until the Town of Hillsborough has received written notification from me (or either of us) of its termination in such time and in such a manner as to afford the Town of Hillsborough and the depository institution a reasonable opportunity to act on it.

Date to Draft:  10th or  25th

Account Holder Name(s): \_\_\_\_\_  
*Please print.*

Service Address: \_\_\_\_\_

Water/Sewer Account Number: \_\_\_\_\_

Depository Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Routing Number: \_\_\_\_\_ Account Number: \_\_\_\_\_  
*Located at bottom left side of your check. Located at middle or bottom right side of your check.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_